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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Kendra	
Write the name that is on	First name	First name
your government-issued picture identification (for example, your driver's	Middle name Williams	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 6986	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Kendra First Name	Williams Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years	Business name	Business name
Include trade names and doing business as names	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	726 E 51st St Apt 3a Number Street	Number Street
	Chicago Illinois 60615	
	City State Zip Code Cook	City State Zip Code
	County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
6. Why you are choosing this district	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	btor 1 Kendra		Williams	Case number (if known)	
	First Name	Middle Name	Last Name		
Pai	rt 2: Tell the Court Abo	ut Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description Bankruptcy (Form B2010)). Also,  Chapter 7 Chapter 11 Chapter 12 Chapter 13			
	How you will pay the fee	more details about how you cashier's check, or money of may pay with a credit card of a line of the cashier's check, or money of may pay with a credit card of a line of the cashier's check, or money	u may pay. Typically, if you order If your attorney is or check with a pre-printestallments. If you choose ing Fee in Installments (Covaived (You may request red to, waive your fee, and t applies to your family sing must fill out the Application.	ou are paying the feat submitting your payed address.  The this option, sign and a sign and the soption only if your may do so only if you are unable to submit the sound on the sign and you are unable to submit the submit to t	clerk's office in your local court for e yourself, you may pay with cash, syment on your behalf, your attorney and attach the <i>Application for</i> you are filing for Chapter 7. By law, a your income is less than 150% of ble to pay the fee in installments). If Chapter 7 Filing Fee Waived (Official
	Have you filed for bankruptcy within the last 8 years?	No.  ✓ Yes. District  District  District	rict of Illinois When When When	MM / DD / YYYY  MM / DD / YYYY  Cas	se number 14-08806 se number se number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	<u>W</u> hen	MM / DD / YYYYY Re	elationship to youse number, if knownslationship to youse number, if knownse number, if known
	Do you rent your residence?	No. Go to line 12.	Statement About an Eviction		u want to stay in your residence?  ou (Form 101A) and file it with

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Kendra Williams Case number (if known)
First Name Middle Name Last Name

Pa	rt 5: Explain Your Effo	rts to Receive a Brie	fing About Credit Counseling			
		About Debtor 1:		Abo	ut Debtor 2 (Տր	oouse Only in a Joint Case):
15.	Tell the court	You must check one:		You	must check one:	
	whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.	L d	counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.
	The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.			he certificate and the payment plan, veloped with the agency.
	about credit counseling before you file for bankruptcy. You must truthfully	counseling agen	ring from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a mpletion.	L d	counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.
	check one of the following choices. If you cannot do so, you are not eligible to file.		er you file this bankruptcy petition, opy of the certificate and payment	)		er you file this bankruptcy petition, opy of the certificate and payment
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your	from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the	ا ا ا	rom an approve obtain those sen nade my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the
	creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this	r 6 1	equirement, atta efforts you made unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this
			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.	١		e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.
		receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.	r r \	eceive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.
			he 30-day deadline is granted only mited to a maximum of 15 days.			he 30-day deadline is granted only mited to a maximum of 15 days.
		I am not required counseling beca	d to receive a briefing about credit ause of:		am not require	d to receive a briefing about credit ause of:
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	1	Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	'	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.
		about credit coun	are not required to receive a briefing seling, you must file a motion for ounseling with the court.	á	about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Kendra Williams Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 3/16/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Kendra		Williams	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12	, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the llso certify that I have delivered to the
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. § 3	342(b) and, in a case in v	vhich § 707(b)(4)(D) applies, certify that I
represented by an	• •			ules filed with the petition is incorrect.
attorney, you do not	•	' '		'
need to file this page.	/s/ Jason Diaz		Date	3/16/2017
	Signature of Attorney f	or Debtor		M / DD / YYYY
	eig.iaiaie ei / iiie.iie) i	0. 200.0.		
	Jason Diaz			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3129130625	Email address	jdiaz@semradlaw.com
			_	
			Illinois	
	Bar number		State	

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Fill in this infor	mation to identify your c	ase:	
Debtor 1	Kendra		Williams
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	our assets /alue of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	<u>·</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,150.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,150.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$22,895.00
Your total liabilities	\$22,895.00
Part 3: Summarize Your Income and Expenses	
Cumulation of the control of the con	
4. Schedule I: Your Income (Official Form 106I)	\$1,537.04
Copy your combined monthly income from line 12 of Schedule I	
Copy your combined monthly income from line 12 of Schedule I	

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Debtor 1 Kendra Williams \_ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,013.11 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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Fill in this in	nformation to identify your c	ase:	-		
	• •		AAPIP		
Debtor 1	Kendra First Name	Middle Na	Williams me Last Name	-	
Debtor 2		daio rio			
(Spouse, if filir	First Name	Middle Na	me Last Name	-	
United Stat	es Bankruptcy Court for the:	Northern	District of Illinois (State)	-	
Case numb (If known)	per		(Guits)	-	
Official	Form 106A/B			Check if this is ar amended filing	1
Sched	lule A/B: Prope	erty			12/1
category w responsible write your i	here you think it fits best. It for supplying correct infor name and case number (if k	Be as complete an mation. If more sp known). Answer ev	d accurate as possible. If two married ace is needed, attach a separate shee	n more than one category, list the asset in the d people are filing together, both are equally let to this form. On the top of any additional pages,	
		_	any residence, building, land, or simi		
	No. Go to Part 2	quitable iliterest il	any residence, building, land, or simi	mar property:	
ш	Yes. Where is the property?				<b>.</b>
1.1			What is the property? Check all that ap	oply. Do not deduct secured claims or exemptions. the amount of any secured claims on <i>Schedu</i>	
'.'	Street address, if available, or	other description	Single-family home  Duplex or multi-unit building	Creditors Who Have Claims Secured by Prope	erty.
			Condominium or cooperative	Current value of the Current value of the	е
		_	Manufactured or mobile home	entire property? portion you own?	
			Land		
	Number Street		Investment property	Describe the nature of your ownership	
			Timeshare	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
'	City State	Zip Code	Other		
			Who has an interest in the property? one.	Check if this is community property (see instructions)	
			Debtor 1 only	Ш	
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and anoth	ther	
			Other information you wish to add ab	oout this item, such as local	
			property identification number:	· · · · · · · · · · · · · · · · · · ·	
If you c	own or have more than one, li	ist here:			
4.0			What is the property? Check all that ap	oply. Do not deduct secured claims or exemptions. the amount of any secured claims on <i>Schedu</i>	
1.2	Street address, if available, or	other description	Single-family home	Creditors Who Have Claims Secured by Prope	
			Duplex or multi-unit building	Current value of the Current value of the	е
•			Condominium or cooperative  Manufactured or mobile home	entire property? portion you own?	
			Land		
İ	Number Street		Investment property	Describe the nature of your ownership	
			Timeshare	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
	City State	Zip Code	Other		
			Who has an interest in the property?	Check if this is community property (see instructions)	
			one.  Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and anoth	ther	
			Other information you wish to add ab	oout this item, such as local	
			property identification number:		

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	First Name Middle eet address, if available, or other description	What is the property? Check all that apply.  Single-family home		claims or exemptions. Put
Stre	eet address, if available, or other descripti			claims or exemptions. Put
Nice		Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	-	red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
City	mber Street  State Zip Code	Investment property  Timeshare Other	Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by
		Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Other information you wish to add about this item	Check if this is co (see instructions)	mmunity property
2 Add	the dollar value of the portion you or	property identification number: wn for all of your entries from Part 1, including any entri	es for pages	
	ive attached for Part 1. Write that nu			
Do you ov you own t 3. Cars, va	that someone else drives. If you lease a vans, trucks, tractors, sport utility vehicles	nterest in any vehicles, whether they are registered or nehicle, also report it on Schedule G: Executory Contracts and motorcycles	-	
3.1		Who has an interest in the property? Check one.  Debtor 1 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage:  Other information:	Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Check if this is community property (see instructions)		
		,		
3.2	Make Model: Year: Approximate mileage:	Who has an interest in the property? Check one.  Debtor 1 only	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.

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	Kendra First Name	Middle Name	Williams Last Name	Case numbe	ei (ii khowii)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions)	nly rs and another	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?	red claims on <i>Schedule</i>
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor	nly	Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?	red claims on <i>Schedule</i>
wat		nes, A I Vs and othe	er recreational vehicles, other	r venicles, and acc	essories	
	No Yes Make	, personal watercraft	fishing vessels, snowmobiles, i	·	Do not deduct secured	•
<b>✓</b>	No Yes	, personal watercraft,	Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor	property? Check  Inly  as and another		red claims on Schedule ims Secured by Proper
4.1	No Yes Make Model: Year: Approximate mileage:	personal watercraft	Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or	property? Check  hly is and another inity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla	claims on Schedule ims Secured by Property  Current value of the portion you own?  claims or exemptions. If the portion on Schedule ims on Sch

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Television/Cellular Phone/Computer \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Costume Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1100.00 for Part 3. Write that number here .....

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Bank of America \$50.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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Deb	tor 1 Kendra	Middle None	Williams	Case number (if known)	
20.	Negotiable instruments i	Middle Name  orate bonds and other negotial nclude personal checks, cashiers'	checks, promissory ne	otes, and money orders.	
	Non-negotiable instrume No No Yes. Give specific information about them	ents are those you cannot transfe	r to someone by signir	g or delivering them.	
21.	Retirement or pension Examples: Interests in IF		), thrift savings accoun	ts, or other pension or profit-sharing plans	
	✓ No  Yes. List each account	Type of account: 401(k) or similar plan:	Institution name:		
	separately.	Pension plan:			
		Retirement account:			
		Keogh: Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:	-		
		Other:	-		
23.	_	r a periodic payment of money to	you, either for life or fo	or a number of years)	
	✓ No  Yes	Issuer name and description:			

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Debt	or 1 Kendra	Williams Case number (if known)  Middle Name Last Name	
24.	First Name Interests in a	Middle Name Last Name  an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition	program.
		530(b)(1), 529A(b), and 529(b)(1).	. •
	✓ No  Yes	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equita	able or future interests in property (other than anything listed in line 1), and rights or powers	<del></del>
		for your benefit	
	V No Yes. Desc	cribe	
26.		pyrights, trademarks, trade secrets, and other intellectual property ernet domain names, websites, proceeds from royalties and licensing agreements	
	<b>✓</b> No		
	Yes. Desc	cribe	
27.		unchises, and other general intangibles illding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licens	es
	<b>✓</b> No		
	Yes. Desc	cribe	
Mor	ney or proper	rty owed to you?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or proper		portion you own?
	Tax refunds ov	wed to you	portion you own?  Do not deduct secured claims or exemptions.
	Tax refunds ov  No Yes. Give s		<pre>portion you own? Do not deduct secured</pre>
	Tax refunds ov  No Yes. Give s abou you a	wed to you specific information Federal:	portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds ov  No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov  No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family support Examples: Past	specific information at them, including whether already filed the returns the tax years  It total:  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  y settlement
28.	Tax refunds ov  No Yes. Give s about you a and t  Family support Examples: Past	specific information  It them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  y settlement  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert specific information  Alimony: Maintenance	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  y settlement  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family support Examples: Past	specific information It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert specific information  Alimony:  Maintenance Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  y settlement  \$0.00 \$0.00  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family support Examples: Past	specific information ut them, including whether already filed the returns the tax years  rt t due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert specific information  Alimony: Maintenance	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  y settlement  \$0.00 \$0.00  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s abou you a and t  Family suppor Examples: Past No Yes. Give s	specific information If them, including whether already filed the returns the tax years	## settlement:    **Portion you own?
28.	Tax refunds ov  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp	specific information  It them, including whether already filed the returns the tax years	### settlement: \$0.00  #### \$0.00  #################################
28.	Tax refunds ov  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp	specific information ut them, including whether already filed the returns the tax years	### settlement: \$0.00  #### \$0.00  #################################
28.	Tax refunds ov  No Yes. Give s abou you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp Soci	specific information  It them, including whether already filed the returns the tax years	### settlement: \$0.00  #### \$0.00  #################################

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Deb	tor 1 Kendra		Williams	Case number (if known)	
	First Name	Middle Nam	e Last Name		
31.	Interests in insurance Examples: Health, disab		ealth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	No Yes. Name the insu of each policy and I		Company name:	Beneficiary:	Surrender or refund value:
32.		of a living trust, expect	n someone who has died proceeds from a life insurance polic	y, or are currently entitled to receive	
33.	Claims against third p		you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims  No Yes. Describe	unliquidated claims o	f every nature, including counterd	claims of the debtor and rights	
35.	Any financial assets your No Yes. Describe	ou did not already list			
36.		-	om Part 4, including any entries fo		\$50.00
Part				nterest In. List any real estate in Par	t 1.
37.	No. Go to Part 6.  Yes. Go to line 38.	ny legal or equitable i	nterest in any business-related pr		Current value of the cortion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable of No Yes. Describe	or commissions you al	ready earned		
39.	Office equipment, furn Examples: Business-relative No		re, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, elec	tronic devices

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Deb	tor 1 Kendra	Williams	Case number (if known)	
	First Name	Middle Name Last Name		
40.	Machinery, fixtures, ed	quipment, supplies you use in business, and tools of your trade		
	<b>✓</b> No			
	Yes. Describe			
	1			
41.	Inventory			
	<b>✓</b> No			
	Yes. Describe			
	_			
12	Interests in partnershi	ne or joint vontures		
42.		ps or joint ventures		
	<b>✓</b> No	Name of entity:	% of ownership:	
	Yes. Give specific	reality.	70 of ownording.	
	information about them			
	110111			
		·	<u> </u>	·
12	Customor lists mailing	lists, or other compilations		
45.		nsts, or other compliations		
	<b>✓</b> No			
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. §	101(41A))?	
	☐ No			
	Yes. Descr	ibe		
	□			
44.	Any business-related p	property you did not already list		
	<b>✓</b> No			
	Yes. Give specific			_
	information			
		<del></del>		<del></del>
		II of your entries from Part 5, including any entries for pages yor r here		
•				
Part	6: Describe Any Fa	rm- and Commercial Fishing-Related Property You O	wn or Have an Interest In.	
	If you own or have an	interest in farmland, list it in Part 1.		
46.	Do you own or have ar	ny legal or equitable interest in any farm- or commercial fishin	ng-related property?	
	No. Go to Part 7.			Current value of the
	Yes. Go to line 47.			portion you own? Do not deduct secured claims
				or exemptions
47.	Farm animals			
	Examples: Livestock, po	oultry, farm-raised fish		
	<b>√</b> No			
	Yes. Describe			

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Debt	tor 1 Kendra	Williams	Case number (if known)	
	First Name Middle Name	Last Name		
48.	Crops-either growing or harvested			
	No No			
	Yes. Describe			
	Tes. Describe			
49.	Farm and fishing equipment, implements, machin	erv. fixtures, and tools of trade		
	_	•		
	✓ No			
	Yes. Describe			
	E and California and California			
50.	Farm and fishing supplies, chemicals, and feed			
	✓ No			
	Yes. Describe			
51.	Any farm- and commercial fishing-related property	y you did not already list		
	✓ No			
	Yes. Describe			
	Li real Passania			
	dd the dollar value of all of your entries from Part 6 art 6. Write that number here		-	
O F	art o. write that number here			
Part	7: Describe All Property You Own or Have	an Interest in That You Did I	Not List Above	
53.	Do you have other property of any kind you did no	t already list?		
	Examples: Season tickets, country club membership			
	✓ No			
	Yes. Give specific			
	information			
54 A	dd the dollar value of all of your entries from Part 7	Write that number here		•
J4. A	du the donar value of all of your entires hom rait i	. Write that humber here		
Part	8: List the Totals of Each Part of this Form			
rait	List the Totals of Lacif Fart of this Form			
55. <b>I</b>	Part 1: Total real estate, line 2		<b>&gt;</b>	<u></u> _
	,			
56.	part 2 total vehicles, line 5	<u></u>	_	
57. <b>P</b>	art 3: Total personal and household items, line 15	¢1100.00		
		\$1100.00	_	
58. <b>P</b>	art 4: Total financial assets, line 36	\$50.00	_	
59. <b>I</b>	Part 5: Total business-related property, line 45			
60 1	Part 6: Total farm- and fishing-related property, line		-	
			_	
61. <b>I</b>	Part 7: Total other property not listed, line 54		_	
62.1	Total personal property. Add lines 56 through 61	\$1150.00		+ \$1150.00
		Ψ1130.00	Copy personal property total	1 \$1100.00
				\$1150.00
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + I	ine 62		1

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Fill in this infor	mation to identify your cas	e:				
Debtor 1	Kendra		Williams			
Debtor 2	First Name	Middle Name	Last Nam	ne		
(Spouse, if filing)	First Name	Middle Name	Last Nam	ne		
United States E	Bankruptcy Court for the: N	lorthern	District of Illing			
Case number			(Sta	te)		
(If known)						Charle if their is an
Official	Form 106C					Check if this is an amended filing
	_	rty Vau Cla	im oo Evon	nt		10/15
	e C: The Prope			•	11	12/15
information. I as exempt. If		isted on <i>Schedul</i> Il out and attach	<i>le A/B: Property</i> (O to this page as ma	fficial Form 106A/B) as	your source, list	the property that you claim necessary. On the top of any
state a speci the amount of tax-exempt r under a law	fic dollar amount as ex of any applicable statut etirement funds—may	empt. Alternativ ory limit. Some e be unlimited in o on to a particular	ely, you may clair exemptions—sucl dollar amount. Ho dollar amount ar	n the full fair market van as those for health ai wever, if you claim an	alue of the prope ds, rights to rec exemption of 10	one way of doing so is to erty being exempted up to eive certain benefits, and 00% of fair market value ned to exceed that amount,
Part 1: Ider	tify the Property You C	laim as Exempt				
	t of exemptions are you cl	-				
	are claiming state and fede		,	5.U. 9 522(D)(3)		
☐ You	are claiming federal exemp	Duoris. 11 U.S.C. §	522(D)(Z)			

For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(a) \$300.00 description: **✓** \$300.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$400.00 description: **✓** \$400.00 **Used Furniture** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

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Debtor 1			Villiams Case number (if known)	
	First Name Midd	dle Name La	ast Name	
Part 2:	Additional Page			
line	of description of the property and on Schedule A/B that lists this perty	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
Line	f cription: Checking account, Bank of America e from edule A/B: 17	\$50.00	\$50.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line	f cription: Television/Cellular Phone/Computer e from edule A/B: 07	\$350.00	\$350.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line	f cription:  Costume Jewelry e from edule A/B: 12	\$50.00	\$50.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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					. age == c	_		
Fill in	this infor	mation to identify your c	ase:					
Debto	r 1	Kendra		Willia	ms			
		First Name	Middle Name	Last	Name			
Debto								
(Spous	e, if filing)	First Name	Middle Name	Last	Name			
United	d States B	ankruptcy Court for the:	Northern	District of	Illinois			
_					(State)			
(If know	number <sup>m)</sup>							
`	•	Form 106D						Check if this is an amended filing
							_	arrended lilling
Sch	nedu	ile D: Credit	ors Who Ha	ve Cla	ıms Secure	ed by Prope	erty	12/15
more s	space is i		ble. If two married peopl onal Page, fill it out, nun					
1. [	Oo any c	reditors have claims s	secured by your proper	ty?				
Ī	No. C	Check this box and sub-	mit this form to the court	with your othe	er schedules. You have	e nothing else to repo	rt on this form.	
Ī	Yes.	Fill in all of the informatio	on below.					
Part '	List A	All Secured Claims						
f	or each cl	aim. If more than one cre	or has more than one secu ditor has a particular claim, alphabetical order accordin	list the other	creditors in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

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Fill	in this infor	mation to identify your c	ase:					
Deb	otor 1	Kendra		Williams				
		First Name	Middle Name	Last Name				
	otor 2	=						
(Spo	ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illinois				
				(State)				
(If kn	se number nown)				<del></del>			
Of	ficial F	orm 106E/F				Che	eck if this is an	n amended filing
Sc	chedu	ıle E/F: Cre	editors Who	Have Unse	cured Claims			12/15
othe Forn clair the e know	er party to a n 106A/B) a ns that are entries in t wn).	any executory contracts and on <i>Schedule G: Exe</i> Ilisted in <i>Schedule D:</i> C he boxes on the left. At	s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa	could result in a claim expired Leases (Official Secured by Property. I	ns and Part 2 for creditors wi . Also list executory contract Form 106G). Do not include a f more space is needed, copy top of any additional pages,	s on <i>Sched</i> any creditor the Part y	ule A/B: Prop rs with partia ou need, fill i	perty (Official ally secured it out, number
Par	t 1: List	All of Your PRIORIT	Y Unsecured Claims					
1.	Do any cr	editors have priority ur	secured claims against y	ou?				
	<b>✓</b> No. (	Go to Part 2.						
	Yes.							
2.	listed, ider As much a Continuat	ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor	is. If a claim has both priorit	y and nonpriority amounding to the creditor's name particular claim, list the ot		both priority	and nonprio	rity amounts.
1						Tatal	Deignite	Mannuiauitu

claim

amount

amount

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 ACS/NELNET \$47,368.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 501 BLEECKER ST Number As of the date you file, the claim is: Check all that apply. Contingent UTICA 13501 New York Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.2 Amerilease \$5,900.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 160 Newport Center Dr Ste 110 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Newport Beach California 92660 City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? **✓** No Yes AT&T Mobility II LLC \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? One AT&T Way Room 3A104 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 07921 Bedminster New Jersey City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? **✓** No Yes

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 Debtor 1 First Name
 Kendra
 Williams
 Case number (if known)

 Last Name
 Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	ı Page	
	After listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.4	BK OF AMER	Last 4 digits of account number	\$643.00
	Nonpriority Creditor's Name 4161 PIEDMONT PKWY	When was the debt incurred? 8/2011	
	Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
	GREENSBORO North Carolina 27410	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No		
	Yes		
4.5	Blitt & Gaines PC Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	661 Glenn Ave Number Street	When was the debt incurred? n/a	
	Trained Office	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Wheeling Illinois 60090	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Other	
	Is the claim subject to offset?		
	✓ No		
	Yes		
4.6	CB/CARSONS Nonpriority Creditor's Name	Last 4 digits of account number	\$207.00
	PO Box 659813	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	San Antonio Texas 78265	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Other. Specify Other	
	Is the claim subject to offset?		
	✓ No		
	Yes		

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Debtor 1 Kendra Williams Case number (if known)
First Name Middle Name Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	on Page	
	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.7	CB/NY&CO Nonpriority Creditor's Name P.O. Box 659728 Number Street  San Antonio Texas 78265	Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$469.00
	City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Other	
4.8	City College of Chicago Nonpriority Creditor's Name 226 W. Jackson Blvd. Number Street  Chicago Illinois 60606 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt Is the claim subject to offset?  Yes	Last 4 digits of account number  When was the debt incurred? n/a  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Tuition	\$150.00
4.9	City of Chicago Parking Nonpriority Creditor's Name 121 N. LaSalle St # 107A Number Street  Chicago Illinois 60602 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  Yes	When was the debt incurred?	\$0.00

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Cook County Health & Hospital System \$212.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 25706 Network Place Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60673 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes Freedman Anselmo Lindberg \$0.00 4.11 Last 4 digits of account number \_ Nonpriority Creditor's Name n/a 1771 W Diehl #150 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Naperville Illinois 60566 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ 2012-M1-119963 Is the claim subject to offset? **✓** No Yes IDOR-Bankruptcy Section 4.12 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 64338 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60664 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Notice Only

✓ No Yes

Is the claim subject to offset?

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 JH PORTFOLIO DEBT EQUI \$483.00 Last 4 digits of account number Nonpriority Creditor's Name 5757 PHANTOM DR STE 225 When was the debt incurred? 11/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent HAZELWOOD Missouri 63042 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes 4.14 **MCYDSNB** \$377.00 Last 4 digits of account number Nonpriority Creditor's Name 9111 DUKE BLVD When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent MASON Ohio 45040 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.15 Northwestern College \$0.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 7725 Harlem Ave When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bridgeview Illinois 60455 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Notice Only Is the claim subject to offset? **✓** No

Yes

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Roger's Auto Group \$9,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2720 S Michigan Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60616 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes SEARS/CBNA \$1,370.00 4.17 Last 4 digits of account number \_ Nonpriority Creditor's Name 13200 SMITH RD When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CLEVELAND Ohio 44130 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other Other. Specify \_ Is the claim subject to offset? **✓** No Yes TD BANK USA/TARGETCRED 4.18 \$482.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/2016 PO BOX 673 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS 55440 Minnesota Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No

Yes

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** The Reserve at Las Brizas Apartment 4.19 \$1,800.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4323 Northshore Dr Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 75038 Irving Texas City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ Other Is the claim subject to offset? **✓** No Yes Van Ru Credit Corp 4.20 \$1,402.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 1350 E Touhy Ave Suite 100E n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Des Plaines Illinois 60018 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Northwestern College Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Kendra Williams Case number (if known)

First Nai	ne Middle Name Last Name			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purpos	es only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00	
			Total claims	
Total claims	6f. Student loans	6f.	\$47,368.00	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$22,895.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$70,263.00	

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Fill in this information to identify your case:					
Debtor 1	Kendra	Williams			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(		

#### Official Form 106G

П	Check if this is an
_	amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or com	pany with whom you have	the contract or lease	State what the contract or lease is for
2.1	East Lake Management Name 200 N. Dearborn St.			Residential Lease, Debtor is Lessee, 1 year lease
	Number	Street		
	Chicago	Illinois	60601	
	City	State	Zip Code	

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			Do	cument Page .	03 01 / I
Fill i	n this infor	mation to identify your c	ase:		
Deb	tor 1	Kendra		Williams	
		First Name	Middle Name	Last Name	
	tor 2 use, if filing)	First Name	Middle Name	Last Name	
Unit	ed States E	Sankruptcy Court for the:	Northern	District of Illinois	
Cas	e number			(State)	
(If kno	own)				Object White is a
					Check if this is an amended filing
Of	ficial	Form 106H			
<u>Sc</u>	neaui	e H: Your Cod	leptors		12/15
		er every question.	ou are filing a joint case, do	not list either spouse as a c	odebtor.)
2.			lived in a community propicto, Puerto Rico, Texas, Wa	- '	Community property states and territories include Arizona, California,
	✓ No. 0	Go to line 3.			
			r spouse, or legal equival	ent live with you at the tim	e?
		No		" 0	
	Ш	Yes. In which communit	y state or territory did you	live?	_ Fill in the name and current address of that person.
		Name of your spouse, f	ormer spouse, or legal equi	valent	<u> </u>
		Number Street			—
		City	State	Zip Code	<u> </u>
3	In Column	1 list all of your code	stors. Do not include your	snouse as a codebtor if y	our spouse is filing with you. List the person shown in line 2
١٠.	05.0	, an or your couer			our spouse is ming with you. List the person shown in line 2

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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		50	oarriorie	r ago o r			
Fill in	this information to identif	y your case:					
Debtor	r 1 Kendra		William	S			
	First Name	Middle Name	Last Na	ame	– Che	eck if this is:	
Debtor	r 2 e, if filing) First Name	Middle Nege	Loot No		-   -	An amended filing	
		Middle Name	Last Na			A supplement showing post-petition chapter	1:
the:	States Bankruptcy Court for	Northern	District of Illin	nois tate)		expenses as of the following date:	
Case number (If known)					_	MM / DD / YYYY	
Offic	cial Form 106I						
Sch	edule I: Your Ir	ncome				12 <i>/</i> -	15
spouse	e. If more space is neede er (if known). Answer eve	d, attach a separate she ry question.		_		not include information about your ional pages, write your name and case	
	ll in your employment	· ·				Debtor 2	
inf	formation.	rmation. Employment status				Employed	
att	you have more than one job, each a separate page with formation about additional		✓ Employed  Not Employed			Not Employed	
	ployers.	Occupation					
	clude part time, seasonal, or If-employed work.	Employer's name	TNG ON B	EHALF OF SELI	ECT MEDIA		
	ccupation may include student	Employer's address	1955 Lake	Park Dr Se Ste 4	100		
or homemaker, if it applies.			Number Street			Number Street	
				Coorgio	20080		
			Smyrna City	Georgia State	30080 Zip Code	City State Zip Code	
		How long employed there?					
Part 2	2: Give Details About	Monthly Income					
		the date you file this form	<b>ກ.</b> If you have ເ	nothing to repo	rt for any line, v	write \$0 in the space. Include your non-filing	_
	se unless you are separated.	vo moro than one omplover	combine the i	nformation for	all amplayare fo	or that person on the lines below. If you need	
	space, attach a separate sh		, combine the i			For Debtor 2 or	
					Debtor 1	non-filing spouse	
C	List monthly gross wages, sa deductions.) If not paid monthloe.			2.	\$599.26		
	Estimate and list monthly over	ertime pay.		3.	+ \$0.00		
4. (	Calculate gross income. Add	line 2 + line 3.		4.	\$599.26		
				L	-		

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Debtor 1Kendra	Williams	Case number (if			
First Name Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse		
Copy line 4 here	<b>→</b> 4.	\$599.26			
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$109.07			
5b. Mandatory contributions for retirement plans	5b.	\$0.00			
5c. Voluntary contributions for retirement plans	5c.	\$0.00			
5d. Required repayments of retirement fund loans	5d.	\$0.00			
5e. Insurance	5e.	\$0.00			
5f. Domestic support obligations	5f.	\$0.00			
5g. Union dues	5g.	\$0.00			
5h. Other deductions. Specify:	5h. +	\$0.00 +			
6. Add the payroll deductions. Add lines $5a+5b+5c+5d+5e+5h$ .	+5f + 5g 6.	\$109.07			
7. Calculate total monthly take-home pay. Subtract line 6 from I	line 4. 7.	\$490.19			
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, a the total monthly net income.	ınd 8a.	\$0.00			
8b. Interest and dividends	8b.	\$0.00			
8c. Family support payments that you, a non-filing spouse, dependent regularly receive	or a				
Include alimony, spousal support, child support, maintenand divorce settlement, and property settlement.	ce, 8c. <u>.</u>	\$356.00			
8d. Unemployment compensation	8d.	\$0.00			
8e. Social Security	8e.	\$0.00			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (bene under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income	•	\$600.00			
8g. Pension or retirement income	8g.	\$0.00			
8h. Other monthly income. Specify: See attached	8h. +	\$90.85 +			
9. <b>Add all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8		\$1,046.85			
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	10. spouse	\$1,537.04 +	=	\$1,537.04	
11. State all other regular contributions to the expenses that y include contributions from an unmarried partner, members of your friends or relatives. Do not include any amounts already included in lines 2-10 or an	our household, your d	ependents, your roomn			
Specify:			11	\$0.00	
12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical			,	\$1,537.04  Combined	
13. Do you expect an increase or decrease within the year after No.	er you file this form?			monthly income	
Yes. Explain:					

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Debtor 1Kendra		Williams		Case number (if	
First Name	Middle Name	Last Nam	пе	known)	
Part 1: Describe Employm	nent				
	Debtor 1			Debtor 2	
Employment status	Employed  Not Employed			Employed  Not Employed	_
Occupation	Thet Employed			The Employed	
Employer's name	Back to Health Chir	opractic Medical	l Center		_
Employer's address	12647 S Justine St				
	Number Street			Number Street	
	Calumet Park	Illinois	60827	City State Zip Code	
How long employed there?	City	State	Zip Code	ony state zip code	
		<del></del>			

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Debtor 1			Williams	Case number (if		
	First Name	Middle Name	Last Name	known)		_
Part 2:	Give Details About Mo	nthly Income				
Officia	l Form 1061. Additior	nal page.				
				For Debtor 1	For Debtor 2 or non-filing spouse	
8h.Other	monthly income. Specify:					
1. Back	to Health Chiropractic Medical (	Center		\$90.85		

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		Docu	iment Page 38 of 71	-		
Fill in this infor	mation to identify	your case:				
Debtor 1	Kendra		Williams			
Bostor 1	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Ness	Look Nove o	An amended filir	ıq	
	First Name	Middle Name	Last Name	브	nowing post-petition chapter	12
United States E	Bankruptcy Court fo	or the: Northern [	District of Illinois (State)		the following date:	10
Case number (If known)				MM / DD / YYYY	<del></del>	
Official	Form 106					
	e J: Your E					12/15
		-				12/13
-		s possible. If two married people areded, attach another sheet to this				
	wer every questio	-	,	, ,		
Part 1: Des	cribe Your Hou	sehold				
1. Is this a joi	nt case?					
✓ No. Go	to line 2					
Yes. D	oes Debtor 2 live	in a separate household?				
	No					
	┛ ┓ Yes. Debtor 2 m	nust file Official Forms 106J-2, <i>Expen</i>	nses for Separate Household of Debi	for 2.		
2. Do vou hav	e dependents?	□ No		-		
Do not list D	-	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live	
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you?	
			Child	17 years	No.	
					✓ Yes.	
			Child	20 years	No.	
					Yes.	
	penses include f people other	No				
than		Yes				
yourself an dependents	•					
Part 2: Esti	mate Your Ong	oing Monthly Expenses				
Estimate vou	r expenses as of v	our bankruptcy filing date unless y	ou are using this form as a suppl	ement in a Chapter 1	3 case to report	
_	of a date after the	bankruptcy is filed. If this is a sup		•	-	
	•	non-cash government assistance ided it on Schedule I: Your Income	-		Your expenses	s
	l or home ownersl or the ground or lot	hip expenses for your residence. In . 4.	clude first mortgage payments and		4.	00.00
If not incl	uded in line 4:					
4a. Real e	state taxes				4a <b>\$</b>	0.00
4b. Prope	rty, homeowner's,	or renter's insurance			4b. <b>\$</b>	0.00

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Kendra
 Williams
 Case number (if known)

 Last Name
 Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         5.         \$0.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Talephone, call phone, Internet, satellite, and cable services         6c.         \$190.00           6d. Other, Speatity:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$700.00           8. Childrage and children's education costs         8.         \$0.00           9. Clothing, Jaurdy, and dry cleaning         9.         \$50.00           10. Personal care products and services         10.         \$50.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gaz payments         12.         \$100.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Itelianismance         15a         \$0.00           15. Wateriance.         15a         \$0.00           15. Wateriance.         15a         \$0.00           15. Wateriance.         15a         \$0.00           15. Wateriance.	FIISTName	Middle Name Last Name		
				Your expenses
6a. Electricity, heat, natural gas         6a.         \$160.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$160.00           6d. Other. Specify:         6d.         \$50.00           7. Food and housekeeping supplies         7.         \$700.00           8. Childcare and children's education costs         8.         \$50.00           9. Ciothing, laundry, and dry cleaning         9.         \$50.00           10. Personal care products and services         11.         \$50.00           11. Medical and dental expenses         11.         \$50.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$100.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Instantinement, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           15. Instantinement contributions and religious donations         14.         \$0.00           15. Instantinement contributions and religious donations         15.         \$0.00           15. Life insurance. </td <td>5. Additional mortgage paymer</td> <td>ts for your residence, such as home equity loans</td> <td>5.</td> <td>\$0.00</td>	5. Additional mortgage paymer	ts for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$150.00           6d. Other, Specify:         7.         \$700.00           7. Food and housekceping supplies         7.         \$700.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$50.00           10. Personal care products and services         10.         \$50.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$100.00           10. not include care payments.         12.         \$100.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15b         \$0.00           15c. Vehicle insurance         15c         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. S150.00 6d. Other. Specify: 6d. S160.00 7. Food and housekeeping supplies 7. Food and housekeeping supplies 8. S0.00 9. Clothing, laundry, and dry cleaning 9. S50.00 10. Personal care products and services 10. S50.00 11. Medical and dental expenses 11. S0.00 12. Transportation. Include gas, maintenance, bus or train fare. 0 Do not include care payments 12. S100.00 14. Charitable contributions and religious donations 14. S0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Leath insurance 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 1	6a. Electricity, heat, natural gas		6a.	\$160.00
6d. Other Specify:	6b. Water, sewer, garbage coll	ection	6b.	\$0.00
7. Food and housekeeping supplies         7. \$700.00           8. Childcare and childcare's education costs         8. \$0.00           9. Clothing, laundry, and dry cleaning         9. \$50.00           10. Personal care products and services         10. \$550.00           11. Medical and dental expenses         11. \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$100.00           Do not include car payments         13. \$0.00           14. Charitable contributions and religious donations         14. \$0.00           15. Insurance.         15a         \$0.00           Do not include insurance ededucted from your pay or included in lines 4 or 20.         15a         \$0.00           15b. Health insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance.         15a         \$0.00           15c. Vehicle insurance.         15a         \$0.00           15c. Vehicle insurance. Specify:         15a	6c. Telephone, cell phone, Inte	ernet, satellite, and cable services	6c.	\$150.00
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9. Clothing, laundry, and dry cleaning       9, \$50.00         10. Personal care products and services       10. \$50.00         11. Medical and dental expenses       11. \$0.00         12. Transportation, Include gas, maintenance, bus or train fare.       12. \$100.00         Do not include car payments       13. \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15a       \$0.00         15b. Health insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance       15b       \$0.00         15c. Vehicle insurance       15c       \$0.00         15c. Vehicle insurance. Specify	7. Food and housekeeping supp	blies	7.	\$700.00
10. Personal care products and services       10. \$50.00         11. Medical and dental expenses       11. \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12. \$100.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a. \$0.00         15a. Life insurance       15b. \$0.00       \$0.00         15b. Health insurance       15c. \$0.00       \$0.00         15c. Vehicle insurance       15c. \$0.00         15c. Vehicle insurance. Specify:       15c. \$0.00         15c. Vehicle taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15c       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15c       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c       \$0.00         17c. O	8. Childcare and children's edu	cation costs	8.	\$0.00
11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$100.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15c.       \$0.00         15c. Vehicle insurance. Specify:       15d.       \$0.00         15c. Vehicle insurance. Specify:       15d.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15d.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         \$pecify:       15d.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17c. Installment or lease payments:       17a       \$0.00 <td>9. Clothing, laundry, and dry cl</td> <td>eaning</td> <td>9.</td> <td>\$50.00</td>	9. Clothing, laundry, and dry cl	eaning	9.	\$50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15a. Life insurance 15b. So.00 15b. Health insurance 15c. Vehicle insurance 15c. So.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17c. Car payments for Vehicle 1 17d. So.00 17b. Car payments for Vehicle 1 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. So.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. So.00 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. So.00 20d. Maintenance, repair, and upkeep expenses.	10. Personal care products and	services	10.	\$50.00
Do not include car payments   13.   13.   13.   13.   13.   13.   14.	11. Medical and dental expens	es	11.	\$0.00
14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       00 not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a       \$0.00         15b. Life insurance       15b       \$0.00       15b       \$0.00       15c. Vehicle insurance       15c       \$0.00       15c. Vehicle insurance. Specify:       15d       \$0.00       15d. \$0.00       \$0.00       15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00       \$0.00       16.       \$0.00	_	maintenance, bus or train fare.	12.	\$100.00
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15a. \$0.00  15b. Health insurance  15b. \$0.00  15c. Vehicle insurance  15c. \$0.00  15d. Other insurance. Specify:  15d. \$0.00  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  17d. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061).  18. Your payments you make to support others who do not live with you.  Specify:  20a. \$0.00  20b. Real estate taxes.  20b. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. \$0.00  20d. Maintenance, repair, and upkeep expenses.	13. Entertainment, clubs, recre	ation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance   15a   \$0.00 15b. Health insurance   15b   \$0.00 15c. Vehicle insurance   15c   \$0.00 15c. Vehicle insurance   15c   \$0.00 15d. Other insurance. Specify:   15d   \$0.00 15d. Other insurance. Specify:   16   \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:   16   \$0.00 17. Installment or lease payments:   17a   \$0.00 17b. Car payments for Vehicle 1   17a   \$0.00 17c. Other. Specify:   17b   \$0.00 17c. Other. Specify:   17c   \$0.00 17d. Other. Specify:   17d   \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18. 19. Other payments you make to support others who do not live with you. Specify:   19.   \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property   20a   \$0.00 20b. Real estate taxes.   20b   \$0.00 20c. Property, homeowner's, or renter's insurance   20c   \$0.00 20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00	14. Charitable contributions an	d religious donations	14.	\$0.00
15b		cted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:			15c	\$0.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes of	leducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. S0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  17d. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	17. Installment or lease payme	nts:		
17c. Other. Specify:	17a. Car payments for Vehicle	1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle	2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20b. \$0.00  20c. Property, homeowner's, or renter's insurance  20c. \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				\$0.00
Specify:			18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , , ,	b support others who do not live with you.	10	<b>£0.00</b>
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		s not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	<del></del>
20b. Real estate taxes.  20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , , ,		20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's,	or renter's insurance		
	20d. Maintenance, repair, and	upkeep expenses.		
	20e. Homeowner's association	or condominium dues	20e	\$0.00

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Debtor 1 Kend			Williams	Case number (if known)		
First	Name	Middle Name	Last Name			
21. <b>Other.</b> Sp	ecify:				21	\$0.00
	your monthly expense	es.				\$1,910.00
	nes 4 through 21.					\$0.00
. ,	` '	,, ,,	from Official Form 106J-2			\$1,910.00
22c. Add I	ne 22a and 22b. The res	sult is your monthly exp	enses.		22.	
23. Calculate	your monthly net inco	me.				
23a. Copy	line 12 (your combined	monthly income) from S	Schedule I.		23a	\$1,537.04
23b. Copy	your monthly expenses	from line 22 above.			23b	\$1,910.00
	act your monthly expens		icome.			(\$372.96)
The	esult is your monthly ne	t income.			23c	
			can within the year or do yo			

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Fill in this information to identify your case:									
Debtor 1	Kendra		Williams						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court for the:	Northern	District of Illinois						
			(State)						
Case number (If known)	-								

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	✓ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and							
	that they are true and correct.								
×	/s/ Kendra Williams	<b>x</b>							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 3/16/2017	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in this info	rmation to identify your o	case:					
Debtor 1	Kendra		Williams				
	First Name	Middle Na		е			
Debtor 2 (Spouse, if filing)	First Name	Middle Na	me Last Nam	e			
United States I	Bankruptcy Court for the:	Northern	District of Illino	is			
Case number			(Stat	e)			
(If known)							Check if this is a
Official	Form 107						amended filing
Stateme	ent of Financia	al Affairs fo	r Individuals	Filina for	Bankru	ptcv	12/1
information. number (if kn	ete and accurate as po If more space is neede lown). Answer every q	ed, attach a separ uestion.	ate sheet to this form	On the top of			
	e Details About Your		na wnere You Livea	Before			
	your current marital st	atus?					
	arried t married						
<b>✓</b> 140	rmarried						
✓ No ☐ Yes	s. List all of the places yo	ou lived in the last 3	3 years. Do not include v	where you live no	W.		
Del	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same as I	Debtor 1		Same as Debtor 1
Nu	mber Street		From	Number Street			From
			То		•		То
City	y State	Zip Code		City	State	Zip Code	Comp on Debtor 1
				Same as I	Deptor I		Same as Debtor 1
Nui	mber Street		From	Number Street	:		From
			То				То
City	y State	Zip Code		City	State	Zip Code	
	y State	Zip Code		City	State	Zip Code	
and territo	e last 8 years, did you e pries include Arizona, Califo Make sure you fill out S	ornia, Idaho, Louisia	na, Nevada, New Mexico,	Puerto Rico, Texa			ommunity property states )

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$1360.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$10014.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$9000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. Link \$1,800.00 From January 1 of current year until Est. Child Support \$1,068.00 the date you filed for bankruptcy: Est. Link \$7,200.00 For last calendar year: Est. Child Support \$4,272.00 (January 1 to December 31, 2016 Est. Link \$7,200.00 For the calendar year before that: (January 1 to December 31, 2015

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Williams Debtor 1 Kendra \_\_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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or 1	1 Kendra			Wil	liams	Case number	(if known)
	First Name		Middle Name	Las	t Name		
nsi corp age	iders include your porations of whic	relatives; a h you are a for a busin	iny general partners in officer, director, p less you operate as	; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
<b>✓</b>	No						
Ш	Yes. List all pay	ments to a	an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	ranteed or cosigned		Total amount paid	Amount you still owe	Reason for this payment
				payment	paid	Still OWE	Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Debtor 1 Kendra Williams Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City Zip Code State Property was attached, seized, or levied.

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Debt	tor 1 Kendra	Williams	Case number (if known)	
	First Name Middle Name	Last Name		
11.	accounts or refuse to make a payment because yo		pank or financial institution, set off any am	ounts from your
	✓ No  Yes. Fill in the details.			
		Describe the action th	e creditor took  Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another officia		possession of an assignee for the benefit of	f creditors, a court-
	<b>✓</b> No			
	Yes			
Part	List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did	I you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No  Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift	·		
	Number Street	-		
	City State Zip Code	-		
	Person's relationship to you			
	Person to Whom You Gave the Gift	-		_
		-		
	Number Street	-		
	City State Zip Code	-		
	Person's relationship to you			

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ebtori	Kendra		Williams	Case number (if kno	vn)	
	First Name Mid	idle Name	Last Name	<u> </u>	· —	
. Wit	thin 2 years before you filed for ba	nkruptcy, did y	ou give any gifts or contribut	ions with a total value	of more than \$600	to any charity?
	No					
✓						
	Yes. Fill in the details for each gift	t or contribution	n.			
	Gifts or contributions to charitie	es	Describe what you contrib	outed	Date you	Value
	that total more than \$600				contributed	
	•					
	Charity's Name					
	Number Street					
	City State	Zip Code				
	•	·			_	
rt 6:	List Certain Losses					
<b>✓</b>	No Yes. Fill in the details.  Describe the property you lost a how the loss occurred	nd	Describe any insurance c Include the amount that ins		Date of your loss	Value of property
	now the loss occurred		pending insurance claims o A/B: Property.		1055	1051
7.	List Certain Payments or Tra	noforo				
abo	hin 1 year before you filed for ban out seeking bankruptcy or prepario lude any attorneys, bankruptcy petitic	ng a bankrupto	cy petition?			anyone you consulte
abo		ng a bankrupto	cy petition?			anyone you consulte
abo	out seeking bankruptcy or preparioude any attorneys, bankruptcy petition.	ng a bankrupto	cy petition?			anyone you consulte
abo	out seeking bankruptcy or prepari lude any attorneys, bankruptcy petition	ng a bankrupto	cy petition? credit counseling agencies for s	ervices required in your b	ankruptcy.	
abo	out seeking bankruptcy or prepari lude any attorneys, bankruptcy petition	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a	ervices required in your b	ankruptcy.  Date payment	Amount of
abo	out seeking bankruptcy or prepari lude any attorneys, bankruptcy petition	ng a bankrupto	cy petition? credit counseling agencies for s	ervices required in your b	ankruptcy.  Date payment or transfer	
abo	out seeking bankruptcy or preparing the land attorneys, bankruptcy petition No Yes. Fill in the details.	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing the any attorneys, bankruptcy petition No Yes. Fill in the details.  Semrad Law Firm	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a	ervices required in your b	ankruptcy.  Date payment or transfer	Amount of
abo	out seeking bankruptcy or preparing the any attorneys, bankruptcy petition. No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing the any attorneys, bankruptcy petition. No  Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 20 S. Clark Street	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing the any attorneys, bankruptcy petition. No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	out seeking bankruptcy or preparing the any attorneys, bankruptcy petition. No  Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 20 S. Clark Street	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	ng a bankrupto on preparers, or	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	ng a bankrupto	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State	ng a bankrupto on preparers, or	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address	ng a bankrupto on preparers, or	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	ng a bankrupto on preparers, or 60603 Zip Code	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address	ng a bankrupto on preparers, or 60603 Zip Code	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payment, if	ng a bankrupto on preparers, or 60603 Zip Code	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	ng a bankrupto on preparers, or 60603 Zip Code	cy petition? credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State  Email or website address None Person Who Made the Payment, if	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if Person Who Was Paid	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if Person Who Was Paid	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if Person Who Was Paid	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment
abo	Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, if Person Who Was Paid	ng a bankrupto on preparers, or 60603 Zip Code	cy petition?  credit counseling agencies for s  Description and value of a transferred	ervices required in your b	Date payment or transfer was made	Amount of payment

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Deb	tor 1	Kendra		Williams	Case number (if know	vn)		
		First Name	Middle Name	Last Name				<u> </u>
17.	help	hin 1 year before you file o you deal with your cred not include any payment o  No  Yes. Fill in the details.	litors or to make payme	=	your behalf pay or transf	er any property to	anyone v	who promised to
		100.1						
				Description and value o transferred	f any property	Date payment or transfer was made	Amou	nt of payment
		Scott, Andre		Repayment for Parking Ti	ckets - \$1600 00	02/2017	\$1600	0.00
		Person Who Was Paid		rispaysir is railing ri	0.1010		-	
		Number Street						
		City State	Zip Code					
		transfers that you have alrown No Yes. Fill in the details.		Description and value o	f any Describe a	iny property or received or debts p		Date transfer was made
		Person Who Received Tra	ansfer					
		Number Street						
		City State Person's relationship to y	Zip Code					
		Person Who Received Tra	ansfer					
		Number Street						
		City State Person's relationship to y	Zip Code ou					
19.	ben	hin 10 years before you fi leficiary? ese are often called asset-p		you transfer any property t	o a self-settled trust or si	milar device of wh	ich you a	are a
	<b>✓</b>	No Yes. Fill in the details.						
				Description and value	of the property transferre	d		Date transfer was made
		Name of trust						

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Williams Debtor 1 Kendra Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Williams Debtor 1 Kendra Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Deb	tor 1	Kendra			Will	liams	Cas	se number <i>(ii</i>	fknown)		
		First Name		Middle Name	Last	t Name					
26.		e you been a part	y in any judio	cial or administi	rative procee	ding under	any environmer	ntal law? In	clude settler	ments and orde	ers.
	씜	No Yes. Fill in the det	tails.								
	ш				Court or age	ency		Nature (	of the case		Status of the
		Case title									case
					Court Name						Pending
											On appeal
		Case number			NumberStree	t					Concluded
					City	State	Zip Code				
Pari	t 11:	Give Details Al	oout Your E	Business or Co	onnections	to Any Bu	siness				
	147.1		Cl. 16	hard a standt				6.11. · · · · ·			•
27.	With	nin 4 years before	you filed for	bankruptcy, did	d you own a b	ousiness or	have any of the	following c	onnections t	o any business	??
					-		activity, either f	full-time or p	oart-time		
		_		oility company (l	LC) or limited	d liability pa	artnership (LLP)				
		A partner in a	-	anaging executiv	e of a corpo	ration					
		_		of the voting or $\epsilon$			ooration				
		_		_	-						
		No. None of the a Yes. Check all tha				v for each h	ousiness.				
	ш		ar app.y as c	7 0 4.10 1 1 1.0			are of the busine	ess	Employer I	dentification n	umber Do not
										cial Security n	
		Business Name			_				EIN:		
		Number Street			_				Dates husi	ness existed	
		Number Street			Name	of account	ant or bookkeep	per		nooc oxiotou	
		City	State	Zip Code					From	To	
					Descri	be the natu	are of the busine	ess		dentification n cial Security n	
					_				EIN:	•	
		Business Name									
		Number Street			_				Dates busi	ness existed	
		City	State	Zip Code	Name	of account	ant or bookkeep	per	Гиот	To	
		Oity	Otate	Zip Oode					From	To	
					Descri	he the nati	re of the busine	266	Employer I	dentification n	umber Do not
					Descri	be the nate	are or the busine	-33		cial Security n	
		Business Name			_				EIN:		
					_					_	
		Number Street			Name	of account:	ant or bookkeep	per	Dates busi	ness existed	
		City	State	Zip Code	_	utsount			From	То	

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Debt	tor 1	Kendra			Williams	Case number (if known)
		First Name	1	Middle Name	Last Name	
28.	crec	nin 2 years before ditors, or other par No Yes. Fill in the det	rties.	eankruptcy, did yo	ou give a financial statemer	nt to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
		-			_	
		Number Street				
		City	State	Zin Codo	_	
		City	State	Zip Code		
Part	12:	Sign Below				
t	rue a	ind correct. I unde kruptcy case can	erstand that n result in fines	naking a false sta s up to \$250,000,	tement, concealing proper	nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/S/	Kendra William ure of Debtor 1	S		Signature of Debtor 2
		Oigitati	are or Bestor 1			Date
		Date 3	3/16/2017			Date
Г	Did vo	ou attach addition	al pages to Y	our Statement of	Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
	_ `		.a. pagos to .			
L	✓ N					
	Y	es				
	Did yo	ou pay or agree to	pay someone	who is not an at	torney to help you fill out b	ankruptcy forms?
Г	.∕I N	lo				
	_	es. Name of persor	า			Attach the Bankruptcy Petition Preparer's Notice,
L	┙'	oc. reality of person	•			Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Kendra	Williams		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Otate)	

Check if this is an amended filing

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Kendra		Williams	Case number (ii	f
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Pers	sonal Property Lease	s		
informa		state leases. Unexpired I	leases are leases that	are still in effect; the lea	d Leases (Official Form 106G), fill in the use period has not yet ended. You may
Des	scribe your unexpired person	al property leases			Will the lease be assumed?
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Les	sor's name:				□ No □ Yes
	cription of leased perty:				
Part 3:	Sign Below				
Unde			ny intention about any	property of my estate th	at secures a debt and any personal
4.0			4.0		
	/s/ Kendra Williams		<b>X</b>	unature of Dakter 0	
Si	gnature of Debtor 1		Sig	nature of Debtor 2	
Da	ate 3/16/2017		Da		
	MM/DD/YYYY			MM/DD/YYYY	

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

		Northern Dis	strict of illinois	
In re	Kendra Williams		Case No.	
	Debtor			(If known)
			Chapter _	Chapter 7
	DISCLOSURE OF	COMPENSAT	ON OF ATTORNE	Y FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing of t	he petition in bankruptcy, or agre	eed to be paid to me, for services
	For legal services, I have agreed to a	ccept		\$1,165.00
	Prior to the filing of this statement I	nave received		\$1,165.00
	Balance Due			\$0.00
2.	The source of the compensation paid	d to me was:		
	<b>Debtor</b>	Other (spec	sify)	
3.	The source of the compensation paid	d to me is:		
	Debtor	Other (spec	sify)	
4.	I have not agreed to share the ab		ation with any other person unles	ss they are
		v firm. A copy of the agre	n with a other person or persons vernent, together with a list of the	
<ol> <li>In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:</li> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> </ol>				
	b. Preparation and filing of any	petition, schedules, state	ements of affairs and plan which r	may be required;
	c. Representation of the debtor	at the meeting of credito	rs and confirmation hearing, and	any adjourned hearings thereof;
6.	By agreement with the debtor(s), the	above-disclosed fee doe	s not include the following servic	pes:
		CERTI	FICATION	
	certify that the foregoing is a completor(s) in this bankruptcy proceedings.	te statement of any agree	ment or arrangement for paymen	t to me for representation of the
	3/16/2017		/s/ Jason Diaz	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Williams, Kendra  Debtor(s)	Case No	Case No		
	_ 5550(,)	Chapter.	Chapter7		
	VERIFIC	CATION OF CREDITOR MAT	RIX		
Ti knowledge	•	y that the attached list of creditors is tr	ue and correct to the best of their		
Date:	3/16/2017	/s/ Williams, Ken Williams, Kendra Signature of Deb			

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ACS/NELNET 501 BLEECKER ST UTICA, NY, 13501

BK OF AMER 4161 PIEDMONT PKWY GREENSBORO, NC, 27410

JH PORTFOLIO DEBT EQUI 5757 PHANTOM DR STE 225 HAZELWOOD, MO, 63042

TD BANK USA/TARGETCRED PO BOX 673 MINNEAPOLIS, MN, 55440

MCYDSNB 3911 S Walton Walker Blvd Dallas, TX, 75265

Amerilease 160 Newport Center Dr Ste 110 Newport Beach, CA, 92660

AT&T Mobility II LLC One AT&T Way, Room 3A104 C/O Debbie Beeman Bedminster, NJ, 07921

CB/CARSONS PO Box 659813 San Antonio, TX, 78265

CB/NY&CO P.O. Box 659728 San Antonio, TX, 78265

Cook County Health & Hospital System 15900 South Cicero Avenue, Bldg B Oak Forest, IL, 60452

City College of Chicago 226 W. Jackson Blvd. Chicago, IL, 60606

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Roger's Auto Group 2720 S Michigan Ave Chicago, IL, 60616

SEARS/CBNA 13200 SMITH RD CLEVELAND, OH, 44130

The Reserve at Las Brizas Apartment 4323 Northshore Dr Irving, TX, 75038

Van Ru Credit Corp 1350 E Touhy Ave Suite 100E Des Plaines, IL, 60018

Blitt & Gaines PC 661 Glenn Ave Wheeling, IL, 60090

Freedman Anselmo Lindberg 1771 W Diehl #150 Naperville, IL, 60566

Northwestern College 7725 Harlem Ave Bridgeview, IL, 60455

IDOR-Bankruptcy Section PO Box 64338 Chicago, IL, 60664

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$1,113.00 in attorney fees plus costs in the amount of \$387.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.
Adding additional bills \$31.00
Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not

Kendra Williams Matter Number 386509-001 Initial \

represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.\*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 03/16/2017

Attorney

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Kendra Williams Matter Number 386509-001 Initial: M

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Debtor 1 Kendra First Name	Middle Name	Williams Last Name	Case number (if known)	
	estions for Reporting Purpos			
16. What kind of debts do you have?	16a. Are your debts primar "incurred by an individue No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primar	ily consumer debt ual primarily for a p ily business debts r investment or thr	ersonal, family, or househo ? Business debts are debts ough the operation of the b	Id purpose." that you incurred to obtain ousiness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	ter 7. Do you estimat		erty is excluded and administrative creditors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	<b>5,00</b> 1	-5,000 -10,000 1-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	I have examined this petition	and I declare unde	er nenalty of periuny that the	e information provided is true and
For you	correct.  If I have chosen to file under of title 11, United States Coounder Chapter 7.  If no attorney represents me out this document, I have ob I request relief in accordance I understand making a false sconnection with a bankrupto both. 18 U.S.C. §§ 152, 134	Chapter 7, I am aw de. I understand the and I did not pay o tained and read the with the chapter o statement, conceali y case can result in	are that I may proceed, if ele relief available under each ragree to pay someone whe notice required by 11 U.S. fittle 11, United States Cong property, or obtaining natines up to \$250,000, or in	igible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed to is not an attorney to help me fill C. § 342(b).  de, specified in this petition.  noney or property by fraud in apprisonment for up to 20 years, or
	Signature of Debtor 1 \ Executed on3/16/20	17	Signature of De Executed on	
		DD / YYYY	LAGCULGO UII	MM / DD / YYYY

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	upperson and the States of the Control Addition and				
Fill in this info	rmation to identify your ca	ise:			
Debtor 1	Kendra		Williams		
	First Name	Middle Name	Last Name	·	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					Check if this is ar
Official	Form 106De	С			amended filing
Declarat	tion About an I	_ Individual Deb	tor's Schedules		12/15
16			onsible for supplying correct info		
ii two marrieu	people are ning togethe	n, both are equally respe	maine for supplying correct inte	ormation.	
				a false statement, concealing pro	
	erty by fraud in connecti 1341, 1519, and 3571.	on with a bankruptcy ca	se can result in fines up to \$250	0,000, or imprisonment for up to 20	years, or both. 18
0.5.6. 99 152,	1541, 1519, and 5571.				
Part 1: Sign	n Below				
and managed spins					
Did you p	pay or agree to pay some	one who is NOT an attori	ney to help you fill out bankrupt	cy forms?	
No No					
Yes.	Name of person		Attach Bankruptcy Petitio	on Preparer's Notice, Declaration, and	
LI			Signature (Official Form	119).	
		- 41-4 t have werd 41-2 av		Abic destauation and	
	naity of perjury, I declare are true and correct.	s that I have read the sur	mmary and schedules filed with	uns deciaration and	
<b>46</b>	· ······· \ / Va.	a in last	, <b>x</b>		
	dra Williams of Debtor 1	dre V Gella	Signature of D	ehtor 2	
Olymature	OF POUROL 1 1		Oig. iaidie Oi D		

Date

MM/DD/YYYY



Date 3/16/2017

MM/DD/YYYY

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Debtor 1	1 Kendra		Williams	Case number (if known)
	First Name	Middle Name	Last Name	
	ithin 2 years before you editors, or other parties		ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details	below.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street	***************************************		
	City S	tate Zip Code		
Part 12	: Sign Below			
true	and correct. I understankruptcy case can resu	and that making a false stault in fines up to \$250,000, dra Williams	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rety, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Date 3/16.	/2017	_	Date
Did	you attach additional p	ages to Your Statement o	f Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
	No Yes			
Did	you pay or agree to pay	someone who is not an a	ttorney to help you fill out	bankruptcy forms?
	No			
冒	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor	Kendra		Williams	Case number (if			
1	First Name	Middle Name	Last Name	known)			
Part 2:	List Your Unexpired	l Personal Property Leas	es				
informa	tion below. Do not list r	perty lease that you listed in real estate leases. Unexpired property lease if the trustee	leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).			
Des	Describe your unexpired personal property leases Will the lease be assumed?						
Les	sor's name:			□ No □ Yes			
	cription of leased perty:						
Les	sor's name:			□ No □ Yes			
	cription of leased perty:						
Les	sor's name:			□ No □ Yes			
	cription of leased perty:						
Les	sor's name:	фіценти вызільнями почина ченнями наменнями почина на мароки пот дин таких пама заменами.		No Yes			
	cription of leased perty:						
Less	sor's name:			□ No □ Yes			
	cription of leased perty:						
Less	sor's name:			□ No □ Yes			
	cription of leased perty:						
Less	sor's name:			□ No □ Yes	* special traffic		
	cription of leased perty:						
	Sign Below	mika di kaka kanda di kaka mendiri ni kawa deneradiki di mika di Kaka di kaka kana menga amuni 12 menti. Na	p or men 1 - 1 Anna (Shao), a' a mar a men a mar ma' ma a' trà Impagnat a mana a mar		V. mary agent		
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.							
	s/ Kendra Williams gnature of Debtor 1	Kendral Velle	Sign	nature of Debtor 2			
Da	ite 3/16/2017 MM/DD/YYYY		Dat	te MM/DD/YYYY			



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## UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Williams, Kendra  Debtor(s)	Case No	Case No.				
		Chapter. Chap	oter7				
	VERIFICA	ATION OF CREDITOR MATRIX					
Th knowledge		hat the attached list of creditors is true and correct	to the best of their				
Date:	3/16/2017	/s/ Williams, Kendra Williams, Kendra Signature of Debtor	ia Williams				



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Debto		Kendra		Williams		Case number	(if known)			
		First Name	Middle Name	Last Nam	e	Column A Debtor 1		Column B Debtor 2 or non-filing spo	ouse	
Do	no		sation f you contend that the amo Act. Instead, list it here:	unt received was a b	enefit	\$0.00			<del></del>	
	r yo r yo	u ur spouse		\$0.00 \$0.00						
		on or retirement in tunder the Social Se	come. Do not include any a	amount received that	t was a	\$0.00				
10.lr am pa int	our yme ema	me from all other s nt. Do not include a ents received as a vic	sources not listed above.S ny benefits received under the ctim of a war crime, a crime errorism. If necessary, list ot	ne Social Security Aca against humanity, or	t or					
To	tal a	mounts from separ	ate pages, if any.			+\$0.00	· ] [	+		
11. Ceach	Calc	ulate your total co	urrent monthly income. Ac	ld lines 2 through 10	) for	\$1,013.11	+			\$1,013.11
C	colu	mn. Then add the t	otal for Column A to the total	al for Column B.			]			7-4-1
11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1										Total current monthly income
Part 2			ther the Means Test A							
		-	monthly income for the year nt monthly income from line		ps:		Copy line	11 here →	Г	\$1,013.11
	N	Aultiply by 12 (the n	umber of months in a year).						L	X 12
12	b. T	he result is your and	nual income for this part of t	he form.					12b.	\$12,157.32
13 <b>Ca</b>	lcul	late the median fa	mily income that applies	to you. Follow these	steps:					
Fill	in t	he state in which yo	u live.	Illinois						
Fill	in t	he number of peopl	e in your household.	3						
		he median family ind	come for your state and size	of					13.	\$75,454.00
ins	truc	tions for this form.	median income amounts, g This list may also be availabl			the separate				
		to the lines compa		the ten of several a	baalabaaa 4 -	Fb !				
1-71	a. 💽	Go to Part 3.	han or equal to line 13. On	the top of page 1, c	neck box 1,	mere is no presumpt	ion or abt	use.		
141	o. <b>C</b>		than line 13. On the top of fill out Form 122A-2.	page 1, check box	2, The presu	mption of abuse is de	etermined	by Form 122A	~2.	
Part 3	9	Sign Below								
В	y sig	gning here, I declare	under penalty of perjury tha	at the information on	this stateme	nt and in any attachm	nents is tr	ue and correct.		
×		/s/ Kendra William gnature of Debtor ใ	X Kendre a	Allins	<b>★</b> Sig	nature of Debtor 2	·			
	Da	ate 3/16/2017 MM/DD/YYYY			Dat	e 3/16/2017 MM/DD/YYYY				
	-		, do NOT fill out or file Form , fill out Form 122A-2 and t							